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**FACSIMILE TRANSMITTAL SHEET AND  
CERTIFICATE OF TRANSMISSION UNDER 37 CFR 1.8****TO: Technical Center 1700/J. Hardee - United States Patent and Trademark Office**

Fax No. 703/872-9310

Phone No. 703/305-5599

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office on September 24, 2003 to the above-identified facsimile number.

 (Signature)

**FROM: Jason J. Camp, Esq.**

Fax No. 513-627-8118

Phone No. 513-627-8150

Listed below are the item(s) being submitted with this Certificate of Transmission:\*\*

- 1) Amendment Transmittal (In duplicate)
- 2) PTO SB-17 Fee Transmittal (In duplicate)
- 3) Amendment (6 pgs.)

Inventor(s): Guarin et al.  
S.N.: 09/889,476  
Filed: June 28, 2001  
Case: AA387

Number of Pages Including this Page: 11

Comments:**OFFICIAL PAPERS**

\*\*Note: Each paper must have its own certificate of transmission, OR this certificate must identify each submitted paper.

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Jason J. Camp 44,582  
Name of Attorney/Agent Registration No.  
Signature of Attorney

IN THE UNITED STATES PATENT & TRADEMARK OFFICE  
RESPONSE/AMENDMENT

Case Docket No. AA387

COMMISSIONER FOR PATENTS  
Technical Center 1700  
Via facsimile 703/872-9310

Dear Sir:

Transmitted herewith is an AMENDMENT for the patent application:

Inventor(s): Guarin et al. Confirmation No. 4213

Serial No.: 09/869,476 Group Art Unit: 1751

Date Filed: 6/28/2001 Examiner: J. Hardee

Title: Fabric Care Composition For Directly Applying To Fabrics

1. ☐ No additional fee is known to be required.
2. ☒ The fee has been calculated as shown below:

	(Col. 1)		(Col. 2)	(Col. 3)	OTHER THAN A SMALL ENTITY	
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA*	RATE	FEE
TOTAL	*	MINUS	**	=	x \$18 =	\$
INDEP.	*	MINUS	***	=	x \$84 =	\$
FIRST PRESENTATION OF MULTIPLE DEP. CLAIM					+ \$280 =	\$
					TOTAL	\$

\* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

\*\* If the highest number of total claims previously paid for is less than 20, write "20" in this space.

\*\*\* If the highest number of independent claims previously paid for is less than 3, write "3" in this space.

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

3. ☒ The Commissioner is hereby petitioned under 37 CFR §1.136(a) to grant any extension of time needed for timely response to the Office Action dated 4/24/2003 in the above-identified application to preserve pendency of said application. The processing fee under 37 CFR §1.17 has been determined as follows: \$410.00 for a 2-month extension of time.

09/29/2003 MTAYLOR

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410.00

4. The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 16-2480. A duplicate copy of this sheet is attached.

- a. ☒ Any patent application processing fees under 37 CFR §1.16.
- b. ☒ Any patent application processing fees under 37 CFR §1.17.

5. The Commissioner is hereby authorized to make any additional copies of this sheet needed to accomplish the purposes provided for herein and to charge any fee for such copies to Deposit Account No. 16-2480.

Jason J. Camp

Attorney or Agent for Applicant(s)

Registration No. 44,582

Tel. No. (513) 627-8150

Date: September 24, 2003

Customer No. 27752

(last revised 4/7/2003)

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**FEE TRANSMITTAL  
for FY 2003**

Patent fees are subject to annual revision.

**Complete if Known**

Application Number 09/869,476

Confirmation Number 4213

Filing Date June 28, 2001

First Named Inventor Guarin

Examiner Name J. Hardee

Group/Art Unit 1751

Attorney Docket No. AA387

**TOTAL AMOUNT OF PAYMENT (\$410.00)****METHOD OF PAYMENT (check one)**

- 1.
- ☒
- The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number 16-2480

Deposit Account Name The Procter &amp; Gamble Company

- ☒
- Charge Any Additional Fee Required Under statute 37 C.F.R. §§1.16 and 1.17

**FEE CALCULATION****1. BASIC FILING FEE - Large Entity**

Code (\$)	Fee Description	Fee Paid
1001 750	Utility filing fee	<input type="checkbox"/>
1002 330	Design filing fee	<input type="checkbox"/>
1004 750	Reissue filing fee	<input type="checkbox"/>
1005 160	Provisional filing fee	<input type="checkbox"/>

**SUBTOTAL (1) (\$)****2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE - Large Entity**

Total Claims	Extra Claims	Fee from Below	Fee Paid
<input type="checkbox"/> - 20** =	<input type="checkbox"/> x	<input type="checkbox"/>	= <input type="checkbox"/>

Independent Claims ☐ - 3\*\* = ☐ x ☐ = ☐Multiple Dependent ☐ = ☐

\*\* or number previously paid, if greater; For Reissues, see below

Code (\$)	Fee Description
1202 18	Claims in excess of 20
1201 84	Independent claims in excess of 3
1203 280	Multiple dependent claim, if not paid
1204 84	**Reissue independent claims over original patent
1205 18	**Reissue claims in excess of 20 & over original patent

**SUBTOTAL (2) (\$)****FEE CALCULATION (continued)****3. ADDITIONAL FEES**

Code (\$)	Fee Description	Fee Paid
1051 130	Surcharge-late filing fee or oath	<input type="checkbox"/>
1052 50	Surcharge-late provisional filing fee or cover sheet	<input type="checkbox"/>
1053 130	Non-English specification	<input type="checkbox"/>
1812 2,520	For filing a request for <i>ex parte</i> reexamination	<input type="checkbox"/>
1804 920*	Requesting publication of SIR prior to Examiner's action	<input type="checkbox"/>
1805 1,840*	Requesting publication of SIR after Examiner's action	<input type="checkbox"/>
1251 110	Extension for reply within 1 <sup>st</sup> month	<input type="checkbox"/>
1252 410	Extension for reply within 2 <sup>nd</sup> month	<input type="checkbox"/>
1253 930	Extension for reply within 3 <sup>rd</sup> month	<input type="checkbox"/>
1254 1,450	Extension for reply within 4 <sup>th</sup> month	<input type="checkbox"/>
1255 1,970	Extension for reply within 5 <sup>th</sup> month	<input type="checkbox"/>
1401 320	Notice of Appeal	<input type="checkbox"/>
1402 320	Filing a brief in support of an appeal	<input type="checkbox"/>
1403 280	Request for oral hearing	<input type="checkbox"/>
1451 1,510	Petition to institute a public use proceeding	<input type="checkbox"/>
1452 110	Petition to revive - unavoidable	<input type="checkbox"/>
1453 1,300	Petition to revive - unintentional	<input type="checkbox"/>
1501 1,300	Utility issue fee (or reissue)	<input type="checkbox"/>
1502 470	Design issue fee	<input type="checkbox"/>
1460 130	Petitions to the Commissioner	<input type="checkbox"/>
1807 50	Petitions related to provisional applications (37 C.F.R. 1.17(q))	<input type="checkbox"/>
1806 180	Submission of Information Disclosure Statement	<input type="checkbox"/>
1809 750	Filing a submission after final rejection (37 CFR § 1.129(a))	<input type="checkbox"/>
1810 750	For each additional invention to be examined (37 CFR § 1.129(b))	<input type="checkbox"/>
1801 750	Request for Continued Examination (RCE)	<input type="checkbox"/>
1802 900	Request for expedited examination of a design application	<input type="checkbox"/>
1454 1300	Acceptance of unintentionally delayed claim for priority under 35 U.S.C. 119, 120, 121, or 365 (a) or (c)	<input type="checkbox"/>
	Other fee (specify) _____	<input type="checkbox"/>
	Other fee (specify) _____	<input type="checkbox"/>

\* Reduced by Basic Filing Fee Paid **SUBTOTAL (3) (\$410.00)****SUBMITTED BY**

Name (Print/Type)

Jason J. Camp

Registration No.

44,582

Complete (if applicable)

Telephone

(513) 627-8150

Date

September 24, 2003

Signature

WARNING: Information on this form may become public. Credit Card information should not be included on this form. Provide credit card information and authorization on PTO-301.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, D.C. 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450.

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Jason J. Camp                      44,582  
Name of Attorney                      Registration No.  
Signature *JJC*

*6/B*  
*[Signature]*  
*9-26-03*

Case AA387

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In the Application of :  
L. GUARIN ET AL. :  
Serial No. 09/869,476 : Group Art Unit 1751  
Filed June 28, 2001 : Examiner J. Hardee  
Confirmation No. 4213 :  
For FABRIC CARE COMPOSITION FOR DIRECTLY  
APPLYING TO FABRICS

**AMENDMENT**

Commissioner for Patents  
Alexandria, VA 22313

Dear Sir:

In response to the Office Action dated April 24, 2003 (Paper No. 4), please enter the following amendments and consider the accompanying remarks. The Commissioner is hereby authorized to charge any necessary fees, which Applicant believes to be \$410.00 for a two-month extension of time, to Deposit Account No. 16-2480.

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks begin on page 5 of this paper.